

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

STAND UP FOR OHIO PAC

ADDRESS (number and street)

112 SOUTH WATER SUITE B

Check if different  
than previously  
reported. (ACC)

KENT

OH

44240

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00586610

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
04 01 2016

through

M M / D D / Y Y Y Y Y Y  
06 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

McMahon, Heather, , ,

Type or Print Name of Treasurer

Signature of Treasurer

McMahon, Heather, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
01 16 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

STAND UP FOR OHIO PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	147282.43	147282.43
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	147282.43	147282.43
7. Total Disbursements (from Line 31) .....	67065.91	67065.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	80216.52	80216.52
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	19503.45	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**STAND UP FOR OHIO PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

0.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

127500.01

127500.01

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

127500.01

127500.01

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

19503.45

19503.45

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

278.97

278.97

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

147282.43

147282.43

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

147282.43

147282.43

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	67065.91	67065.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	67065.91	67065.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	67065.91	67065.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67065.91	67065.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	127500.01	127500.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	127500.01	127500.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	67065.91	67065.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	278.97	278.97
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	66786.94	66786.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 40  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. MOVEON.ORG POLITICAL ACTION**

Mailing Address PO BOX 96142

City  
WASHINGTON

State  
DC

Zip Code  
20090

FEC ID number of contributing  
federal political committee.

C

C00341396

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SA11C.4150**

Amount of Each Receipt this Period

0.01

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. MOVEON.ORG POLITICAL ACTION**

Mailing Address PO BOX 96142

City  
WASHINGTON

State  
DC

Zip Code  
20090

FEC ID number of contributing  
federal political committee.

C

C00341396

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63750.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2016

**Transaction ID : SA11C.4180**

Amount of Each Receipt this Period

63750.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. MOVEON.ORG POLITICAL ACTION**

Mailing Address PO BOX 96142

City  
WASHINGTON

State  
DC

Zip Code  
20090

FEC ID number of contributing  
federal political committee.

C

C00341396

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

127500.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2016

**Transaction ID : SA11C.4181**

Amount of Each Receipt this Period

63750.00

☐ Memo Item  
contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

127500.01

**TOTAL** This Period (last page this line number only)..... ►

127500.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 40  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SA13.4237

Amount of Each Receipt this Period

345.00

☐ Memo Item  
Payment of Legal Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 10 / 2016

Transaction ID : SA13.4238

Amount of Each Receipt this Period

1656.00

☐ Memo Item  
Payment of Legal Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4411.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2016

Transaction ID : SA13.4161

Amount of Each Receipt this Period

2410.00

☐ Memo Item  
Payment for signs and banners

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4411.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 40

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input checked="" type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City Youngstown	State OH	Zip Code 44504
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4622.52

Date of Receipt

06 / 20 / 2016

**Transaction ID : SA13.4300**

Amount of Each Receipt this Period

211.52

☐ Memo Item  
Payment for office supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City Youngstown	State OH	Zip Code 44504
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5461.30

Date of Receipt

06 / 22 / 2016

**Transaction ID : SA13.4162**

Amount of Each Receipt this Period

838.78

☐ Memo Item  
Payment for office supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City Youngstown	State OH	Zip Code 44504
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6024.30

Date of Receipt

06 / 23 / 2016

**Transaction ID : SA13.4163**

Amount of Each Receipt this Period

563.00

☐ Memo Item  
Payment of payroll advances

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1613.30



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 40

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 13								

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6223.30

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : SA13.4164**

Amount of Each Receipt this Period

199.00

☐ Memo Item

Payment for office supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10569.45

Date of Receipt

MM / DD / YYYY  
06 / 24 / 2016

**Transaction ID : SA13.4173**

Amount of Each Receipt this Period

4346.15

☐ Memo Item

Payment of payroll expenses 6/12 - 6/25

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

16096.45

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2016

**Transaction ID : SA13.4166**

Amount of Each Receipt this Period

5527.00

☐ Memo Item

Payment for lodging

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10072.15

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA13

Transaction ID : SA13.4173

Jerry Pena, 2194 W 37th St, Cleveland, OH 44113, \$2,746.15; Michael Damiano, 863 Cedar Way, #802, Boardman, OH 44512, \$1,600.00

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 40

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16221.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : SA13.4167

Amount of Each Receipt this Period

125.00

☐ Memo Item

Payment of parking fee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17003.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : SA13.4168

Amount of Each Receipt this Period

782.00

☐ Memo Item

Payment for campaign materials

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Stand Up for Ohio**

Mailing Address 25 E Boardman Street  
#428

City  
Youngstown

State  
OH

Zip Code  
44504

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

19503.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

Transaction ID : SA13.4169

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Payment of Consultant fee

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3407.00

19503.45

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA13

Transaction ID : SA13.4169

Consultant Roy Tatem, 1761 W Laredo Street, Chandler, AZ 85224

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 40

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

City  
Dallas

State  
TX

Zip Code  
75235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2016

Transaction ID : SA15.4160

Amount of Each Receipt this Period

278.97

☐ Memo Item

Refund of airline ticket

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

278.97

278.97

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. AirBnB**

Mailing Address 888 Brannan Street

City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
June Lodging expenses

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4130

Amount of Each Disbursement this Period

6166.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AirBnB**

Mailing Address 888 Brannan Street

City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Site Usage Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4131

Amount of Each Disbursement this Period

34.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AirBnB**

Mailing Address 888 Brannan Street

City  
San FranciscoState  
CAZip Code  
94107Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4583

Amount of Each Disbursement this Period

5527.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11727.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Anointed Grace Ministries**

Mailing Address 800 E 152nd Street

City  
ClevelandState  
OHZip Code  
44110Purpose of Disbursement  
Space Rental

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period

1650.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anointed Grace Ministries**

Mailing Address 800 E 152nd Street

City  
ClevelandState  
OHZip Code  
44110Purpose of Disbursement  
Catering for campaign event

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	7		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Damiano, Michael, , ,**Mailing Address 863 Cedar Way  
#802City  
BoardmanState  
OHZip Code  
44512Purpose of Disbursement  
Salary

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				2	4		2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4588

Amount of Each Disbursement this Period

1600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Doubletree**

Mailing Address 1111 Lakeside Ave E

City  
ClevelandState  
OHZip Code  
44114Purpose of Disbursement  
Hotel expenses

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2016

FEC Identification Number

C

**Transaction ID : SB21B.4134**

Amount of Each Disbursement this Period

294.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Doubletree**

Mailing Address 1111 Lakeside Ave E

City  
ClevelandState  
OHZip Code  
44114Purpose of Disbursement  
Hotel expense

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2016

FEC Identification Number

C

**Transaction ID : SB21B.4135**

Amount of Each Disbursement this Period

1362.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Garcia, James, , ,**

Mailing Address 16030 S 14th Dr

City  
PhoenixState  
AZZip Code  
85045Purpose of Disbursement  
Media consulting fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2016

FEC Identification Number

C

**Transaction ID : SB21B.4156**

Amount of Each Disbursement this Period

1869.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3526.02



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Gween Bochmann Photography**

Mailing Address 5297 W 50th Street

City  
BrookparkState  
OHZip Code  
44142Purpose of Disbursement  
Photography

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	9			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4138**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hunter, Carnahan, Shoub, Byard & Harshman**Mailing Address 3360 Tremont Rd  
Suite 230City  
ColumbusState  
OHZip Code  
43221Purpose of Disbursement  
Legal Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4572**

Amount of Each Disbursement this Period

345.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hunter, Carnahan, Shoub, Byard & Harshman**Mailing Address 3360 Tremont Rd  
Suite 230City  
ColumbusState  
OHZip Code  
43221Purpose of Disbursement  
Legal Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4574**

Amount of Each Disbursement this Period

1656.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2251.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Inner City Transit**

Mailing Address P.O. Box 569

City  
YoungstownState  
OHZip Code  
44501Purpose of Disbursement  
Buses for campaign event

007

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4175

Amount of Each Disbursement this Period

995.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JVA Campaigns**

Mailing Address 240 N 5th St #360

City  
ColumbusState  
OHZip Code  
43215Purpose of Disbursement  
Printing of Cards

006

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4585

Amount of Each Disbursement this Period

782.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pena, Jerry, , ,**

Mailing Address 2194 W 37th Street

City  
ClevelandState  
OHZip Code  
44113Purpose of Disbursement  
Reimbursement for May expenses

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4158

Amount of Each Disbursement this Period

331.91

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2108.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Pena, Jerry, , ,**

Mailing Address 2194 W 37th Street

City  
ClevelandState  
OHZip Code  
44113Purpose of Disbursement  
Salary

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	4			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4587**

Amount of Each Disbursement this Period

 2746.15☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rodriguez, Zulema, , ,**Mailing Address 1550 E Campbell Ave  
Apt 4005City  
PhoenixState  
AZZip Code  
85014Purpose of Disbursement  
Political Consulting Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4139**

Amount of Each Disbursement this Period

 17500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Rodriguez, Zulema, , ,**Mailing Address 1550 E Campbell Ave  
Apt 4005City  
PhoenixState  
AZZip Code  
85014Purpose of Disbursement  
Reimbursement for t-shirt printing

007

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	0			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.4155**

Amount of Each Disbursement this Period

 320.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 20566.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Sedoki, Ciza, , ,**

Mailing Address 1361 E 114th Street

City  
ClevelandState  
OHZip Code  
44106Purpose of Disbursement  
Pay advance

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4581

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

City  
DallasState  
TXZip Code  
75235Purpose of Disbursement  
Airline ticket- Consultant Zulzy Rodriguez

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4128

Amount of Each Disbursement this Period

830.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address P.O. Box 36647-1CR

City  
DallasState  
TXZip Code  
75235Purpose of Disbursement  
Airline Ticket- Consultant Roy Tatem

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4129

Amount of Each Disbursement this Period

270.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1326.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Reimbursement for Payroll- 5/15 to 5/31

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4171

Amount of Each Disbursement this Period

3201.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stand Up for Ohio**Mailing Address 25 E Boardman Street  
#428City  
YoungstownState  
OHZip Code  
44504Purpose of Disbursement  
Reimbursement of payroll- 6/1 to 6/11

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4172

Amount of Each Disbursement this Period

5946.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4152

Amount of Each Disbursement this Period

329.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9477.66

**TOTAL** This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.4171

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$800.00; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 \$800.00; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113 \$1601.92

Form/Schedule: SB21B

Transaction ID: SB21B.4172

Kea Mathis, 4261 Americana Dr, Cuyahoga Falls, OH 44224 \$1600.00; Michael Damiano, 863 Cedar Way #802, Boardman, OH 44512 \$1600.00; Jerry Pena, 2194 W. 37th St, Cleveland, OH 44113, \$2,746.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	0				2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4575**

Amount of Each Disbursement this Period

211.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				2	2				2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4577**

Amount of Each Disbursement this Period

476.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				2	2				2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4578**

Amount of Each Disbursement this Period

362.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1050.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 500 Staples Dr

City  
FarmingtonState  
MAZip Code  
01702Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	6				2	3					2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4582**

Amount of Each Disbursement this Period

199.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tatem, Roy, , ,**

Mailing Address 1761 W Laredo Street

City  
ChandlerState  
AZZip Code  
85224Purpose of Disbursement  
Consulting fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	6				0	1					2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4153**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tatem, Roy, , ,**

Mailing Address 1761 W Laredo Street

City  
ChandlerState  
AZZip Code  
85224Purpose of Disbursement  
Consulting fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	6				1	4					2	0	1	6

FEC Identification Number

C

**Transaction ID : SB21B.4154**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5199.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Tatem, Roy, , ,**

Mailing Address 1761 W Laredo Street

City  
ChandlerState  
AZZip Code  
85224Purpose of Disbursement  
Parking

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4584**

Amount of Each Disbursement this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tatem, Roy, , ,**

Mailing Address 1761 W Laredo Street

City  
ChandlerState  
AZZip Code  
85224Purpose of Disbursement  
Consulting fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4586**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Union Solidarity Graphics**Mailing Address 3200 Skillman Ave  
2nd FloorCity  
Cuyahoga FallsState  
OHZip Code  
44224Purpose of Disbursement  
Banners, labels, and signs

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.4576**

Amount of Each Disbursement this Period

2410.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5035.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**STAND UP FOR OHIO PAC**

Full Name (Last, First, Middle Initial)

**A. Williams, Danny, , ,**

Mailing Address 15625 Wyatt Rd

City  
East ClevelandState  
OHZip Code  
44112Purpose of Disbursement  
Pay advance

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4579

Amount of Each Disbursement this Period

338.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

338.00

**TOTAL** This Period (last page this line number only)..... ►

66855.97

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 27 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4237

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

345.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

345.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

345.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 28 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4238

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

1656.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1656.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 10 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1656.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 29 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4161

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2410.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2410.00

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 20 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2410.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 30 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4300

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

211.52

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

211.52

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 20 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

211.52

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 31 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4162

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

838.78

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

838.78

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 22 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

838.78

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 32 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4163

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

563.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

563.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

563.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 33 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4164

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for OhioN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

199.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

199.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 23 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

199.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 34 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4173

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

4346.15

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4346.15

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 24 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

4346.15

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SC/10

Transaction ID : SC/10.4173

Jerry Pena, 2194 W 37th St, Cleveland, OH 44113, \$2,746.15; Michael Damiano, 863 Cedar Way, #802, Boardman, OH 44512, \$1,600.00

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 36 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4166

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

5527.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5527.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 26 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5527.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 37 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4167

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

125.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

125.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 28 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

125.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 38 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4168

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

782.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

782.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 28 / 2016

Date Due

M M / D D / Y Y Y Y

9/13/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

782.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 39 OF 40

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4169

**STAND UP FOR OHIO PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Stand Up for Ohio☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 25 E Boardman Street  
#428

City

Youngstown

State

OH

ZIP Code

44504

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

**TERMS**

Date Incurred

MM / DD / YYYY  
06 / 29 / 2016

Date Due

MM / DD / YYYY  
9/13/2016

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2500.00

**TOTALS** This Period (last page in this line only)..... ►

19503.45

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SC/10

Transaction ID : SC/10.4169

Consultant Roy Tatem, 1761 W Laredo Street, Chandler, AZ 85224

Form/Schedule:

Transaction ID: